

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Glenn C. Forrester :
: Art Unit: 2146
Serial No.: 10/803,288 :
: Examiner: Baturay, Alicia
Filed: March 18, 2004 :
:
For: METHODS AND SYSTEMS :
FOR RETRIEVING :
INFORMATION OVER A :
COMPUTER NETWORK :

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is:
Amendment Transmittal (3 pgs.)
Amendment After Final Rejection in response to final Office Action, dated August 22,
2008 (18 pgs.)

STATUS

2. Applicant
☒ Claims small entity status.
☐ is other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) _____ Applicant petitions for an extension of time under 37 C.F.R. 1.136
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
_____ first month	\$ 130.00	\$ 65.00
_____ second month	\$ 490.00	\$ 245.00
_____ third month	\$ 1,110.00	\$ 555.00
_____ fourth month	\$1,730.00	\$ 865.00
_____ fifth month	\$2,250.00	\$1,175.00

Fee: _____ \$ _____

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

An extension of _____ months has already been secured. The fee paid
_____ therefor \$ _____ is deducted from the total fee due for the total months
of extension now requested.

Extension fee due with this request \$ _____

OR

- (b) ☒ Applicant believes that no extension of term is required. However, this
conditional petition is being made to provide for the possibility that
applicant has inadvertently overlooked the need for a petition for extension
of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL RATE FEE	ADDITIONAL RATE FEE
TOTAL INDEP.	MINUS	=	x \$26.00 = \$	OR	x \$52.00 = \$
	MINUS	=	x \$110.00 = \$		x \$220.00 = \$
	FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			+ \$195.00 = \$	+ \$390.00 = \$
				TOTAL ADDITIONAL FEE \$	OR TOTAL ADDITIONAL FEE \$

- (a) ☐ No additional fee for Claims is required

OR

- (b) ☐ Total additional fee for claims required \$ _____

FEE PAYMENT

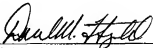
5. Attached is a check in the sum of \$ _____
- ☐ Charge Deposit Account No. 01-2384 the sum of \$
A duplicate of this transmittal is attached.

FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.
7. ☐ Other:


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